

Message from Commissioner Nancy Navarretta



As we approach the midpoint of summertime and the long hot days continue to roll on, several important observances occur during this time. June is LGBTQ+ Pride month, a month when we celebrate diversity, individuality, and visibility. It is a time for acceptance and conversation, and one of those conversations is about mental health struggles within the community. Mental health is an overarching problem in the LGBTQ+ community due to societal stigmas and discrimination. According to the CDC, around 60% of LGBT youth have reported that they hold feelings of sadness or hopelessness and stopped doing activities they otherwise enjoyed participating in. National Minority Mental Health Awareness Month is observed each July to bring awareness to the unique struggles that racial and ethnic minority communities face regarding mental illness in the United States. The COVID-19 pandemic has made it harder for racial and ethnic minority groups to get access to mental health and substance-use treatment services. Both of these observances are important because they help to raise awareness of the issue while highlighting available relevant resources. Visibility, conversation, and understanding are essential in order to bridge the disparity gap and create equal access to mental healthcare across all genders, sexualities, and demographics.

Our state legislature is now in recess for the summer, having completed its work for the 2022 legislative session. In this issue we provide a recap of bills of interest to the behavioral health community that were passed. This year's mid-term budget, which makes needed changes to the two-year budget that passed last session, is unusual in that it also allocates federal dollars received by the state to address pandemic-related issues. The dollars allocated for behavioral health from both the general fund and the American Rescue Plan Act cover a wide variety of initiatives including 24/7 mobile crisis, housing supports, police training, military support, respite beds, and peer supports to name a few.

With an increased focus on crisis services as part of emergency response, in this issue you'll find information on the rollout of 988, the state's new three-digit dialing code that will route callers to free and confidential support for people in distress. As always, feel free to reach out with ideas, questions, or feedback. We enjoy reading your comments!

Save the Date: International Overdose Awareness Day – Wednesday, August 31, 2022

International Overdose Awareness Day is the world's largest annual campaign to end overdose, remember without stigma those who have died, and acknowledge the grief of the family and friends left behind. Stay tuned for more details about DMHAS' annual remembrance event in the coming weeks.



2022 Legislative Session Wrap-Up

The 2022 legislative session saw the passage of a number of bills that will be of interest to the behavioral health community. For more detailed summaries as well as other pertinent information, please visit the [DMHAS Legislative Unit page](#).

Here are some items of interest to the behavioral health community contained in [HB 5506](#), the state budget and the language that implements the budget. There is also some information on [SB 9](#), which added additional language related to the budget. This year's budget is the mid-term budget, making needed changes to the two-year budget that passed last session. It is an unusual budget in that it also allocates federal dollars received by the state to address pandemic related issues.

The dollars allocated for behavioral health from both the general fund and the American Rescue Plan Act cover a wide variety of initiatives, including 24/7 mobile crisis, housing supports, police training, military support, respite beds, and peer supports to name a few. Partial funding for implementation of a DMHAS electronic health record was also included in the budget adjustment.

COLA funding for not-for-profit provider (PNP) staff was also included in the budget. The funding continues last year's 4% COLA and provides an approximately 5% COLA for this year. \$20M for one-time funding to be distributed proportionally across state agencies and accounts to stabilize PNPs was also included. Guidance related to the distribution of new PNP dollars is forthcoming.

Additional language of interest in the budget is as follows:

- Transfers responsibility for the legalized gambling study from DCP to DMHAS and requires the next study to be completed by August 1, 2023.
- Requires Office of Higher Education to establish a program to provide loan reimbursement grants to Department of Public Health (DPH)-licensed health care providers employed full-time as a health care provider in the state. Requires certain other agencies and organizations to provide free menstrual products in each restroom that is accessible to residents without stigmatizing the individuals requesting the products. This includes public or private homeless shelters that receive grants from the housing commissioner and domestic violence emergency shelters that receive state funding.
- The bill establishes a 16-member task force to study and make recommendations on certificates of need (CONs). Generally, existing law requires health care facilities to apply for a CON when proposing to (1) establish a new facility or provide new services, (2) change ownership, (3) purchase or acquire certain equipment, or (4) terminate certain services.
- Annually redirects \$12 million of Tobacco Settlement Fund proceeds from the General Fund to the Tobacco and Health Trust Fund yearly and makes changes to the Fund's legislative reports. The bill requires that the Fund's board recommend disbursements to programs for the fund's statutory purposes (i.e., tobacco use prevention, education, and cessation; substance abuse reduction; and unmet physical and mental health needs of the state). The bill requires the board to report every two years to the Public Health and Appropriations committees including an accounting of unexpended amounts in the fund.

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2022 Legislative Session Wrap-Up continued...

- Requires sellers, or their agents or employees, to request that each person intending to purchase cigarettes or tobacco products present a driver's license or identity card to establish that the person is at least 21 years old.
- Requires the Department of Correction commissioner to annually review, evaluate, and make recommendations on substance use disorder and mental health screening, diagnostic, and treatment services available to individuals who are incarcerated throughout their entire incarceration and reintegrating these individuals into the community in consultation with DMHAS.

The bills below have been signed by the Governor:

[HB 5419](#) (PA 22-69) codifies the existing Regional Behavioral Health Action Organizations (RBHAOs). It requires each RBHAO to serve as a strategic community partner responsible for behavioral health planning, education, and promotion; coordinating behavioral health issues prevention; and advocacy for community behavioral health needs and services within its region. The bill makes changes to the membership of the state's Board of Mental Health and Addiction Services that correspond to the codification of the RBHAO structure.

[HB 5044](#) (PA 22-48) establishes an Opioid Settlement Fund as a separate non-lapsing fund administered by a 37-member Opioid Settlement Advisory Committee who will meet quarterly with assistance from DMHAS. The monies must not supplant existing programs and be used for specified substance use disorder abatement purposes approved by the Advisory Committee.

[HB 5430](#) (PA 22-108) expands the list of non-opioid treatment options that must be included on a patient's treatment care plan that prescribing practitioners must provide when prescribing opioids for more than 12 weeks. It also removes products used by licensed drug manufacturers or individuals to test a substance from the statutory definition of "drug paraphernalia" (e.g., fentanyl testing strips), as long as they are not used in unlicensed manufacturing or distribution of controlled substances. The bill allows dispensing methadone from a mobile unit and allows multi-care institutions to provide behavioral health services or substance use treatment in a mobile narcotic treatment program.

[SB 450](#) (PA 22-45) requires DMHAS to develop a plan to construct a new facility for Whiting Forensic Hospital (WFH). The bill reestablishes WFH's advisory board as an oversight board and expands the board's duties. It requires the Judicial Branch and Psychiatric Security Review Board (PSRB) consideration of an acquittee's safety and well-being, in addition to the protection of society and requires DMHAS to convene a working group to evaluate the PSRB. The bill allows WFH and Connecticut Valley Hospital to authorize an acquittee's temporary leave without having to apply to the PSRB for approval. DMHAS, in collaboration with the Department of Administrative Services, will evaluate state service classifications for physicians and senior level clinicians employed by Whiting Forensic Hospital.

Provider Spotlight: Deborah Lake, MA, Director of Program Planning and Implementation, The Governor's Prevention Partnership



Deborah joined The Partnership in 2019 as a program manager focused on substance use prevention training with communities and businesses. As Director of Program Planning and Implementation, she works with the program team to coordinate trainings to parents and community members, guides the Statewide Youth Advisory Board, and collaborates with others on National Prevention Week activities among other prevention and mentoring programs. The Partnership offers training and technical assistance to mentoring programs throughout the state, as well as peer-to-peer leadership opportunities for young people and parents around substance use prevention and resources in both English and Spanish.

[Click to visit the Governor's Prevention Partnership website](#)

What do you love most about your job?

I love that I'm able to connect with so many people across the state through our work. Whether it's directly with different parent or community groups, by collaborating with the other DMHAS Prevention Resource Links, or through my service on the ADPC Prevention Subcommittee as one of the chairs, I love being inspired by the passion I see for helping people and making sure that Connecticut residents are as healthy as possible. The Partnership's mission is one that I believe in, and we have a wonderful team. I am able to be creative, constantly learn, and be involved with a variety of projects.

Are there any challenges?

Challenges are opportunities to grow and it's through working together that we're able to find solutions. We certainly had challenges, especially supporting mentor programs at the beginning of COVID, but we were able to respond with guidance on how to move to virtual connections while keeping youth safe. The same was similar to our other prevention trainings, but it was an opportunity to expand access to information.

Why is prevention so important and how can people get involved at the community level?

We all practice prevention every day, even when we don't realize it. It keeps us safe and healthy, but also builds our communities. No one knows what they don't know, and prevention and harm reduction ensure that information is shared about the current risks and ways to promote wellbeing. We work with local schools and youth service bureaus to support their prevention training. For example, this summer we are doing a series of professional and personal development workshops for youth enrolled in a summer employment program. Last month was the statewide youth conference, Future Prevention Leaders, which highlighted ways in which young people can lead the prevention movement, but also how lucky Connecticut is to have DMHAS, the Local Prevention Councils, Regional Behavioral Health Action Organizations, and Resource Links like The Partnership making prevention accessible to all. For information on the Youth Advisory Board, peer-to-peer prevention programming, mentoring or other training, please contact us at 860.523.8042 or visit our [website](#).

This year Munson's Chocolates donated a portion of the proceeds from the sale of each Munson's Chocolate Camo Easter Bunny to the [Military Support Program](#), which provides an array of behavioral health services to Connecticut's veterans, citizen soldiers and their family members. A sincere thanks to Munson's Chocolates for their generous support in raising awareness of the MSP!



Pictured: Munson's Vice President Jim Florence presents a check to Carleen Zambetti (DMHAS Managed Services Division) for the Connecticut Military Support Program



The **988 Suicide & Crisis Lifeline** (formerly known as the National Suicide Prevention Lifeline) is a network of more than 200 state and local call centers funded by the U.S. Department of Health and Human Services (HHS) through Substance Abuse and Mental Health Services Administration (SAMHSA) and administered by Vibrant Emotional Health. In Connecticut, DMHAS and the Department of Children and Families (DCF) fund the Connecticut 988 Contact Center, which is operated by the United Way of Connecticut/211.

988 Contact Center services include rapid 24/7 access to trained crisis contact center staff who can help people experiencing suicidal, substance use and other mental health crises, provide referrals to resources, and perform warm transfers to mobile crisis services or emergency services as needed/desired. Studies have shown that after speaking with a trained crisis counselor, most people served by the Lifeline are significantly more likely to feel less depressed, less suicidal, less overwhelmed and more hopeful.

The 988 "soft launch" began on July 16 and marks the beginning of the transition to 988 across the United States. This means that the number is active, but it is important to understand that the crisis service system infrastructure is still in development, and each state and territory is at different stages of readiness for 988. There is still much work to be done at the federal, state, and local levels. 988 will continue to grow and evolve over the years, just as 911 and the emergency medical service system has grown over the past five decades.

To reach the 988 Suicide and Crisis Lifeline, people can call or text 988 or chat at www.988lifeline.org. For more information on 988 in Connecticut and available crisis services, please visit <https://www.preventsuicidect.org/get-help/ct-988/>





Clients, persons in recovery, and members of the DMHAS Problem Gambling Services team at the annual Better Choice summer picnic



Commissioner Navarretta met Hartford Yard Goats mascot, Chompers, at the Governor's Prevention Partnership Youth Prevention Conference at Goodwin



DMHAS Director of Recovery Community Affairs, Elsa Ward, visits the BHcare Valley Social Club



Wishing DMHAS Director of Government Affairs, Mary Kate Mason (center), all the best in her retirement



Ribbon cutting ceremony for Community Health Resources' new home for the Hub, a social-rehabilitation center in Manchester



Commissioner Navarretta with Larry and Ginger Katz of the Courage to Speak Foundation

DMHAS Update

Summer 2022



DMHAS Director of Recovery Community Affairs visits the Bridge House



Mark Jenkins, Executive Director of the Connecticut Harm Reduction Alliance, Commissioner Navarretta, Luiza Barnat, DMHAS Director of Opioid Services, at the 2nd Annual Harm Reduction Conference



The DMHAS Opioid Services team at the 2nd Annual Harm Reduction Conference



Commissioners Juthani (DPH) & Navarretta joined by CT prevention mascot Stella the Starfish at the NPW event in Bridgeport



Grasso Tech's Students4Recovery host Recoverfest in Groton



Elsa joins Musical Intervention onstage. Musical Intervention is an organization in New Haven that focuses on providing people from all walks of life with a safe space and the resources necessary to pursue expression through music.